



**TOWN OF SALISBURY
PARKS & RECREATION COMMISSION**
FIELD AND PARK USE PERMIT APPLICATION

DATE OF EVENT _____ START & END TIMES _____

TYPE OF EVENT _____ LOCATION OF EVENT _____

IS THIS A NON-PROFIT EVENT ? ☐ OR FOR-PROFIT? ☐

NAME OF ORGANIZATION _____

STREET ADDRESS _____ CITY/TOWN _____

CONTACT PERSON _____ DAY PHONE # _____ EMAIL _____

DESCRIPTION OF EVENT AND COMPLETE LIST OF ACTIVITIES:

HOW MANY PEOPLE ARE EXPECTED ? _____

PARK/FIELD USERS FEE (if unknown contact Parks Commission) _____

ALL APPLICATIONS MUST INCLUDE A COPY OF CURRENT CERTIFICATE OF INSURANCE.

IF YOUR ORGANIZATION SERVES YOUTH UNDER 18 YEARS OLD PLEASE INCLUDE THE FOLLOWING ITEMS WITH YOUR APPLICATION:

- A statement of your organization's purpose including, if applicable, website, program information , brochures
- A Copy of a Certificate of Insurance
- A notarized letter stating that the organization runs criminal history, CORI checks, on all staff and volunteers
- A copy of proof that the organization is certified to perform CORI checks through the State of Massachusetts

It is expressly understood and agreed that the regulations of the Parks Commission are to be strictly complied with, and that the undersigned hereby assumes full responsibility for any damages to, or loss of, Town Property, in consequence of such use of the accommodations described above, and engages to make the same good without any expense to the Town. The undersigned also further agrees to promptly pay such charges as may be made for the accommodations requested.

Authorized Applicant Signature _____ **Date** _____

Direct further inquiries to:
Angelica Medina, Parks Department
978-462-7611
pubworks@salisburyma.gov

For Parks Commission Use Date reviewed _____ Approved _____ Rejected _____ Comments: _____ Fee _____
